

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MZ		10-03-01
O.I.P.E. CLASSIFIER		49	10/16/01
FORMALITY REVIEW	CTH	744	10-29-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	11/2/01
Original	11/2/01
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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16	✓
17	✓
18	✓
19	✓
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21	✓
22	✓
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41	✓
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43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	11/2/01
Original	11/2/01
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
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Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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